## APPLICATION DATA SHEET

## APPLICATION INFORMATION

Application Type:: REGULAR Subject Matter:: UTILITY CD-ROM or CD-R?:: NONE

Title:: METHODS FOR CHARACTERIZING THE

INFECTIVITY STATUS OF A HOST Attorney Docket Number::

BIOTI-11 Total Drawing Sheets::

0 Small Entity?:: YES

## INVENTOR INFORMATION

Inventor Authority Type:: INVENTOR Primary Citizenship Country:: UNITED STATES Status:: FULL CAPACITY Given Name:: Robert

Middle Name:: Α. Family Name::

HALLOWITZ City of Residence:: Newmarket State or Prov. of Residence:: Maryland Country of Residence:: UNITED STATES

Street:: 9704 Woodlake Place

City:: Newmarket State or Province:: Maryland Country:: UNITED STATES

Postal or Zip Code:: 21774

Inventor Authority Type:: INVENTOR Primary Citizenship Country:: UNITED STATES

Status:: FULL CAPACITY Given Name:: John Family Name:: KROWKA

City of Residence:: Frederick State or Prov. of Residence:: Maryland Country of Residence::

UNITED STATES Street:: 465 Arwell Court City::

Frederick State or Province:: Maryland Country:: UNITED STATES

Postal or Zip Code:: 21702

Inventor Authority Type:: INVENTOR Primary Citizenship Country:: UNITED STATES

Status:: FULL CAPACITY Given Name:: Shawn Family Name:: MATLOCK City of Residence::

Frederick State or Prov. of Residence:: Maryland Country of Residence:: UNITED STATES

Street:: 6512 Springwater Court

#4402

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City::

State or Province::

Frederick Maryland

Country::

UNITED STATES

Postal or Zip Code::

21701

CORRESPONDENCE INFORMATION

Correspondence Customer Number:: 23599

REPRESENTATIVE INFORMATION

Representative Customer Number::

23599

DOMESTIC PRIORITY INFORMATION

Application::

Continuity Type::

This Application

Parent Application::

Non-Provisional of 60/215,075

Parent Filing Date::

06/30/00

FOREIGN PRIORITY INFORMATION

Application Number::

PCT/US97/19849

ASSIGNMENT INFORMATION

Assignee Name::

Street::

Bio-Tech Imaging, Inc.

5711 Industry Lane Unit 31

City::

State or Province::

Frederick Maryland

Country::

Postal or Zip Code::

USA 21704

Page 2